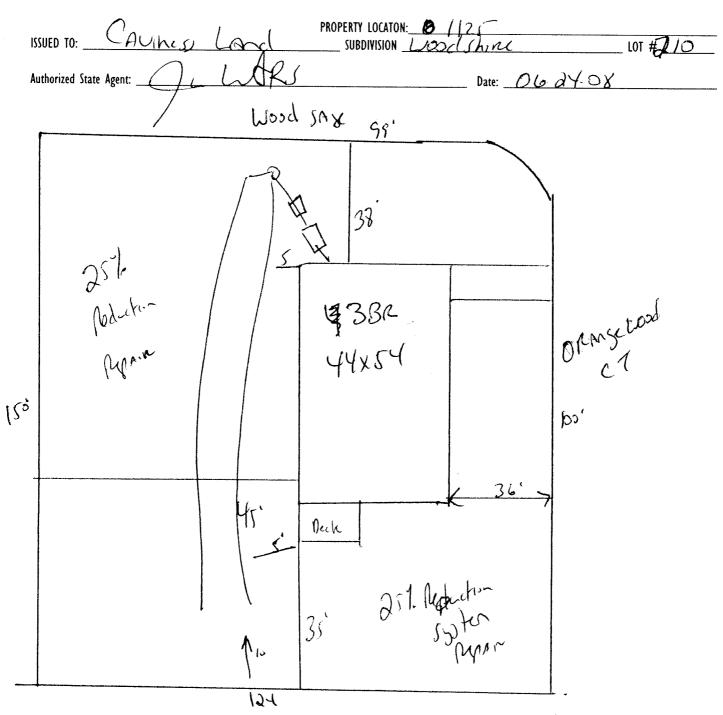
## HTE# 08-500-19307RR Harnett County Department of Public Health

24866

**Improvement Permit** 

A building permit cannot be issued with only an Improvement Permit		
ISSUED TO: CAVIDESS LOND DEV. SUBDIVISION 1/000 Shipe. 101 # 200		
NEW REPAIR   EXPANSI	SUBDIVISION Wood Shing Site Improvements re	
Type of Structure: SED - 44 x 54 -		quired prior to Construction Authorization Issuance:
Proposed Wastewater System Type:		
Projected Daily Flow: 360 GPD	25% Red Lys.	
Number of bedrooms: 3 Number of Occu	pants: 6 max	
Basement □Yes ☑ No		
Pump Required: Ales		
Type of Water Supply:  Community Public Well Distance from well feet Permit valid for: Five years		
Permit conditions: Meet on the maintain All St Backs STUB Out Planbing I No expiration Shallow At ground buck or in the where shown I have not be		
MESUNAL SICONO	vel orhigher where she	olen of thing way not be
Authorized State Agent::	Date: 06 - 24 - S	SEE ATTACHED SITE SKETCH
The issuance of this permit by the Health Department in no way guara	intees the issuance of other permits. The permit holder is responsible for che	ecking with appropriate governing bodies in meeting their requirements. This
site is subject to revocation if the site plan, plat, or the intended use	changes. The Improvement Permit shall not be affected by a change in owner	ership of the site. This permit is subject to compliance with the provisions of
the Laws and Rules for Sewage Treatment and Disposal and to condition	as of this permit.	
	Construction Authorization	
	Construction Authorization	
The annual control of the state	(Required for Building Permit)	
the construction and installation requirements of Rules .1950, .1952, .1 with the attached system layout.	954, .1955, .1956, .1957, .1958. and .1959 are incorporated by references	into this permit and shall be met. Systems shall be installed in accordance
ISSUED TO: CAUNES Land D	PROPERTY LOCATION. 112	_
ISSUED IV. CAPOLIT COT CAPEL DE		107 11 71
Facility Type: SFO-44x S4 3BR Rew Expansion Repair		
	7	
Basement?  Yes Ho Basement Fix	tures? Yes No	2/1
Type of Wastewater System**    See note below if applicable 75	5% reduction system	(Initial) Wastewater Flow: 365 GPD
(See note below, if applicable ) hunto o		
Installation Requirements/Conditions	Number of trenches	۸
Septic Tank Size gallons	Exact length of each trench 100 feet	Trench Spacing: Feet on Center
Pump Tank Size 1000 gallons	Trenches shall be installed on contour at a	Soil Cover: inches
	Maximum Trench Depth of: 18 24 inches	(Maximum soil cover shall not exceed
	(Trench bottoms shall be level to +/-1/4"	36" above the trench bottom)
· · · · · · · · · · · · · · · · · ·	in all directions)	
Pump Requirements:ft. TDH vs	GPM	inches below pipe
		Aggregate Depth: inches above pipe
Conditions:		inches total
*If applicable: I understand the system type specified is different from the type specified on the application. I accept the specifications of this permit.		
Owner/Legal Representative Signature:		Date:
his Construction Authorization is subject to revocation if the site plan,	plat, or the intended use changes. The Construction Authorization shall not b	
onstruction Authorization is subject to compliance with the provisions o	the Laws and Rules for Sewage Treatment and Disposal and to the condition	ons of this permit. SEE ATTACHED SITE SKETCH
$\bigcirc$ . 1 $\downarrow$	100	Dr Wall
uthorized State Agent:	Date:	06-24-08
	Construction Authorization Expiration Da	ate: 0624-2013
	Construction Authorization Expiration Da	ate: () 6 0 9 2013

## Harnett County Department of Public Health Site Sketch



Meet onsite for Final Layort Mintain All set Back.
STUB out Plumbing shallow at ground level or higher where shown
And Pum may not be required - Firtall 2x100 125%. Reduction system